FORM D



UNITED STATES TES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALES OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR**

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OMB NUMBER:

Expires:

Prefix

3235-0076 May 31, 2005

Serial

Estimated average burden hours

SEC USE ONLY

DATE RECEIVED

per response . . . 16.00

UNI	FORM LIMITED OFFERING	EXEMPTION	1 D	THE RECEIVED
ا المان				
Name of Offering (check if this is an an	nendment and name has changed, and in	dicate change.)		
Series C Preferred Stock		<i>.</i>		
Filing Under (Check box(es) that apply):	Rule 504 🔲 Rule 505 🖾 Rule	506 Section	n 4(6) 🔲 ULOE	
Type of Filing: New Filing Amendr	nent			
	A. BASIC IDENTIFICATION	DATA		
1. Enter the information requested about the is	suer			
Name of Issuer (check if this is an amer	dment and name has changed, and indicate	ate change.)		
ObjectVideo, Inc.				
Address of Executive Offices	(Number and Street, City, State, Zip	Code) Telep	hone Number (Inclu	iding Area Code)
11600 Sunrise Valley Drive, Suite 290, Resto	on, Virginia 20191	(703)	654-9300	
Address of Principal Business Operations	(Number and Street, City, State, Zip	Code) Telep	hone Number (Inclu	iding Area Code)
(if different from Executive Offices)				
Same as above.		Same	as above.	
Brief Description of Business	. pc			
Development and sales of computer softwar	е			
Type of Business Organization				DRACECER
□ corporation	☐ limited partnership, already form		her (please specify):	PROCESSED
business trust	limited partnership, to be formed			
	Month Year			JUL 19 2004
Actual or Estimated Date of Incorporation or C		🛛 Ac		\mathcal{C}
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service ab	breviation for <u>State</u>	<u>:</u>	THOMSON D
	CN for Canada; FN for other foreign ju	risdiction) DE	. [FINANCIAL -

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information request	ed for the followin	A. BASIC IDENTIFIC	CATION DATA	Smith. T	
• Each promoter of the issue			act five years:		
 Each beneficial owner have 				0% or more of a	class of equity securities of
the issuer;	mg the power to ve	or dispose, or all oct me	vote of disposition of, i	o, o or more or a	orass of equity securities of
Each executive officer and	l director of corpor	ate issuers and of corporate	general and managing	partners of partne	ership issuers; and
 Each general and managing 	g partner of partner	rship issuers.			•
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Burton, John	,				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o Updata Venture Partners I	·	- · · · · · · · · · · · · · · · · · · ·	eston, Virginia 20191		
Check Box(es) that Apply:	Promoter		⊠Executive Officer	⊠Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				1.000
Fernandez, Raul	,				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o ObjectVideo, Inc., 11600 St	-	· · · · · · · · · · · · · · · · · · ·	inia 20191		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Kaufman, Andrea	,				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o Novak Biddle Venture Part	•	· ·	Suite 1380, Bethesda,	Maryland 20814	,
Check Box(es) that Apply:	Promoter		☐ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Morino, Mario	,				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o ObjectVideo, Inc., 11600 Se	,		inia 20191		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Tarpey, Kenneth	,	4			
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o ObjectVideo, Inc., 11600 Se	unrise Valley Driv	ve, Suite 290, Reston, Virg	inia 20191		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				——————————————————————————————————————
Lipton, Alan	,				
Business or Residence Address	(Number and Str	reet, City, State, Zip Code)			
c/o ObjectVideo, Inc., 11600 Se	unrise Valley Driv	ve, Suite 290, Reston, Virg	inia 20191		
Check Box(es) that Apply:	☐ Promoter		☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Novak Biddle Venture Partner					
Business or Residence Address		reet, City, State, Zip Code)			
7501 Wisconsin Avenue, East			14		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					·
		A. BASIC IDENTIFIC	CATION DATA		
2. Enter the information request	•				
Each promoter of the issue		-	- ·		
 Each beneficial owner have the issuer; 	ng the power to vote	or dispose, or direct the	vote or disposition of, l	0% or more of a c	lass of equity securities of
 Each executive officer and 	director of corporate	issuers and of corporate	general and managing	partners of partner	rship issuers; and
 Each general and managing 	g partner of partnershi	p issuers.			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Novak Biddle Venture Partner					
Business or Residence Address		. City. State, Zip Code)			,,
7501 Wisconsin Avenue, East 7	,	• • • • • •	14		
Check Box(es) that Apply:	☐ Promoter	⊠Beneficial Owner		Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
ABS Ventures IV, L.P.	,				
Business or Residence Address	(Number and Street	, City, State, Zip Code)			
890 Winter Street, Suite 225, V	•				
Check Box(es) that Apply:	Promoter		☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				**************************************
CMGI@Ventures IV, LLC	,				
Business or Residence Address	(Number and Street	, City, State, Zip Code)			
200 Brickstone Square, Suite 2		- ·			
Check Box(es) that Apply:	Promoter		☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in-	dividual)	——————————————————————————————————————			
Updata Venture Partners II, L					
Business or Residence Address		, City, State, Zip Code)			
2100 Reston Parkway, Suite 43	•	· ·			
Check Box(es) that Apply:	Promoter	·	☐ Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street	, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street	, City, State, Zip Code)	***************************************	***************************************	
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street	, City, State, Zip Code)			
	(Use blank sheet, or	copy and use additiona	l copies of this sheet, as	necessary.)	

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?						В	INFOR	MATION	ABOUT	OFFERI	NG					
Answer also in Appendix, Column 2, if filling under ULDE September Septe		**					.,					-				
2. What is the minimum investment that will be accepted from any individual?	1.	Has the	issuer sol	d, or does							~				U	×
Section Sect	2	What is	tha minin						-	•					65	Δ
3. Does the offering permit joint ownership of a single unit? 4. Einst the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed as an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a broker or dealer registered with the SEC and/or with a state or states, but he name of the broker or dealer registered with the SEC and/or with a state or states, but he name first, if individual States in which Person Listed Has Solicited or Intends to Solicit Purchasers AL AL AL AL AL AL AL A	2.	witatis	the minn	ium mves	dinent mat	will be a	cepted III	oni any me	Jividuai?					*********		-
ssion or similar renuncration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed are associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer enally. Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	3.	Does th	e offering	permit jo	int owners	hip of a si	ngle unit?									_
to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) N/A Basiness or Residence Address (Number and Street, City, State, Zip Code) N/A Name of Associated Broker or Dealer N/A States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Chock "All States" or check individual) [R1] [R2] [R3] [R3] [R4] [R5] [R7] [R4] [R5] [R5] [R5] [R5] [R5] [R5] [R5] [R5	4.															
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N/A																
Business or Residence Address	Full	Name (L	ast name f	irst, if ind	ividual)											
Business or Residence Address	NI/A															
N/A		ness or P	esidence /	Adress	(Number	and Stree	t City Str	te Zin Co	ode)							
Name of Associated Broker or Dealer N/A	Dusi	iless of N	esidence A	ruuress	(Nulliber	and Stree	i, City, Sie	ite, zip Ct	oue)							
N/A																
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	NJ/A															
Check "All States" or check individual States		s in Whi	ch Person	Listed Ha	s Solicited	or Intend	ls to Solici	t Purchase	ers	<u>-</u>						
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MT]															_	
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N/A														·		
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[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) N/A Name of Associated Broker or Dealer N/A States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]															∐ AII	States
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Nam	e of Asso	ociated Bro	oker or De	ealer											
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	N/A															
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]		s in Whi	ch Person	Listed Ha	s Solicited	or Intend	ls to Solici	t Purchase	ers							
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	for exchange and already exchanged.		Aggregate	Amount Already
	Type of Security		Offering Price	Sold
	Debt	\$	0	\$ 0
	Equity (Series C Preferred Stock)	\$	6,760,340	\$ 6,760,340
	☐ Common ☒ Preferred			
	Convertible Securities (including warrants)	\$	0	\$ 0
	Partnership Interests	\$	0	\$ 0
	Other (Specify:)	\$	0	\$ 0
	Total	\$	6,760,340	\$ 6,760,340
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
			Number Investors	Dollar Amount of Purchases
	Accredited Investors	_	11	\$ 6,760,340
	Non-accredited Investors		0	\$ 0
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Tour	Dellas Assessed
	Type of Offering		Type of Security	Dollar Amount Sold
	Rule 505		N/A	\$ N/A
	Regulation A		N/A	\$ N/A
	Rule 504	_	N/A	\$ N/A
	Total	_	N/A	\$ N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	-		
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees	••••	🛮	\$ 50,000
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$

	eds to the issuer."		\$	6,710,340
to be used for each of the purposes shown. furnish an estimate and check the box to the ments listed must equal the adjusted gross p	left of the estimate. The total of the pay-			
		Officers, Directors, &		Payments To
6.1.			Π.	Others
				
				
- · · -		□\$	\\$	
offering that may be used in exchange for th	e assets or securities of another issuer	□ \$	□\$	
Repayment of indebtedness		□ \$	\$	
Working capital		□ \$	 🗆 \$	6,710,340
Other (specify):		□ \$	□ \$	
		—————	— П«	
				6,710,340
				0,710,340
2000 (0000)	,			
	D. FEDERAL SIGNATURE			
ire constitutes an undertaking by the issuer to	furnish to the U.S. Securities and Exchange	Commission, upon		
(Print or Type)	Signature?		Date	
	Kenneth Jay	(4)	MUL	14, 2004
	Title of Signer (Print or Type) Chief Financial Officer			
1	Part C - Question 4.b above. Salaries and fees	Salaries and fees	Payments to Officers, Directors, & Affiliates Salaries and fees	Part C - Question 4.b above. Payments to Officers, Directors, & Affiliates Salaries and fees. \$ \$ \$ \$ \$ \$ \$ \$ \$

ATTENTION
Intentional misstatements or omissions of fact constitute receral criminal violations. (See 18 U.S.C. 1001.)